



Ask for more from your radiology report

Traditional radiology reports no longer meet the demands of the modern patient care

"[...] a significant number of oncologists had difficulty in finding or interpreting tumour measurements in the radiologist's report. As a result, up to 40% of the interviewed oncologists needed to remeasure 1-3 cases every week, either because they did not find the measurements in the report or because they did not agree with the radiologist's assessment."¹, as demonstrated by a recent study of oncologists' perspective on radiology reporting.

For more than a century, radiology reports have served as a mobile representation of features and findings seen on medical imaging. While oncology care has advanced tremendously over this time, the typical radiology report

It's time to ask for more from your radiology report

We at Mint Medical believe that no data should be left behind on the image and furthermore, that the information taken from medical images should be relatable to other clinical data and presented in a structured, standardized, reproducible and comprehensive format. Our software platform mint Lesion[™] offers dedicated reporting profiles for oncological radiological diagnostics and applies the format and information structure have not.

Free-text reports often lack both content and clarity burdening the physicians with a time-consuming and cumbersome task of finding and extracting essential information. The important details are often buried in paragraph statements and the precision of diagnosis can be hampered by the requisite concision in reporting along with avoiding verbosity in notation. "As precision oncology care advances, a simple imaging report describing tumor presence, size, and location is no longer adequate for patient care."²

established high data quality standards in the routine clinical reporting process. The software keeps track of all the measurements longitudinally. The mint way of structured reporting, which combines imaging and clinical data, enables completeness and reproducibility of results, as well as clarity in interdisciplinary communication.

			Lun	ng	Colon Rectum	Ston Esoph	b nach nagus	Pancreas
			Prosta PI-RA) ate .DS	Head Neck	Live LI-RA	er NDS	Brain Neuro
Solid Tumors (General) RECIST 1.1 PERCIST WHO Choi EORTC	Solid Tumors (Specific) mRECIST HCC PCWG3 PCWG3 / RECIST 1.1 combined mRECIST Mesothelioma	Immunotherapy iRECIST irRECIST imRECIST irRC		Lympho Lugano Cheson LYRIC iwCLL RECIL	oma / CLL		Neuro- RANO RANO- RAPNO Low Gra RANO- Low Gra	Oncology BM -LGG Pediatric ade Glioma LGG Adult ade Glioma

¹Spînu-Popa, E.V., Cioni, D., Neri, E. Radiology reporting in oncology—oncologists' perspective. Cancer Imaging (2021) ²Nass, S.J., Cogle, C.R., Brink, J.A. et al. Improving Cancer Diagnosis and Care: Patient Access to Oncologic Imaging Expertise. J Clin Oncol. (2019)

How you can comprehend evidence and alleviate conjecture with mint Lesion™

mint Lesion[™] longitudinally tracks the disease extent across imaging timepoints and demonstrates tumor regression and progression in a structured and standardized summary, connecting all the data across the patient's journey.

Detailed image snapshots of lesion size measurements and annotations are directly embedded in the report, which minimizes re-evaluation of images as a mandate to understand the result of the radiology report. mint Lesion[™] reports are generated in a structured, comprehensive and visually consumable multimedia format that reduces the cognitive burden in reading lengthy narratives and enables effective physician-patient communication.

Comparison to the start of treatment as well as relevant priors mitigate overlooked slow progression, missed new lesions and mistaken early treatment discontinuation.



Scientifically proven advantages of mint Lesion™

Recent comparative studies have proven the advantage of computer-aided, criteria-based standardized evaluation over the non-standardized, common practice free text reporting. Significant differences in tumor response ratings were discovered after re-evaluating CT scans using mint Lesion[™] as dedicated software applying RECIST 1.1.³ / iRECIST⁴. The differences were mainly caused by the rating

of even small tumor burden changes as PD or PR, or by comparison to the most recent prior CT scan instead of the comparison to nadir or baseline values. The studies thereby confirm the need of standardized quantitative radiological assessment in daily clinical practice, which can be successfully implemented with mint Lesion[™].

³Goebel, J., Hoischen, J., Gramsch, C. et. al. Tumor Response Assessment: Comparison between unstructured free text reporting in routine clinical workflow and computer-aided evaluation based on RECIST 1.1 Criteria. J. Cancer Res Clin Oncol (2017)

⁴Schomburg, L., Malouhi, A., Grimm, M.O. et al. iRECIST-based versus non-standardized free text reporting of CT scans for monitoring metastatic renal cell carcinoma: a retrospective comparison. J Cancer Res Clin Oncol (2022)

About Mint Medical

Mint Medical is an innovation-driven company for medical 3D imaging technologies. Based in Heidelberg, Germany and with a subsidiary in Hamilton, NJ, USA Mint Medical provides cutting-edge solutions for oncological radiological diagnostics and evaluation of therapy progress in clinical routine, clinical research, and clinical trials.

For more information visit www.mint-medical.com

